

DEMONIC INVOLVEMENT IN HUMAN LIFE AND ILLNESS

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Using Scripture as a primary source, the role of demons in the etiology of physical and psychological illness is discussed. Four questions central to the issue are considered: (1) What physical and/or psychological symptoms are recorded in Scripture in connection with demon possession? (2) Does Scripture indicate that all illness is of demonic causation? (3) What does Scripture say about the "psychological demons" so frequently spoken of today among some groups of Christians? (4) What factors can be used to differentiate demon possession from mental illness?

Demons are presented as a dreadful reality in Scripture and are described as inflicting a number of physical and psychological ailments on mankind. Evangelical Christians throughout history have believed in the existence and power of demons, although interest in their activity and potency has waxed and waned across the centuries.

Concomitant with the increased interest in the occult by non-Christians in recent times, there are a growing number of Christians who view demons as the cause of most, if not all, physical and psychological illness. One reads of spirits of loneliness, paranoia, inferiority, fantasy, and nicotine (Tapscott, 1975, pp. 55-56). Books by Basham (1971, 1972), Brooks (1973a, 1973b), and Whyte (1969, 1971) have done much to focus attention on the role of demons in physical and mental illness. Hammond and Hammond (1973, pp. 113-115) include a listing of 323 kinds of demons and suggest that this compilation is not exhaustive. These authors have also developed a theory of schizophrenia, believing it to be composed of a complex of 15 or more ruler demons who often bring with them a number of lesser demons.

Christians who accept the hypothesis that much, if not all, illness is of demonic origin consequently espouse treatment consistent with their diagnosis (e.g., binding or casting out of demons) rather than more traditional medical or psychological methods. They may be reluctant to take medication or to become involved in other conventional forms of treatment, believing that to do so would either be ineffective or would indicate lack of faith.

Since illness affects all Christians in one form or another, the questions being raised represent far more than an academic issue. If the above hypotheses are correct, they have major implications for both Christian medical doctors and for counselors. To gain answers to the above questions, we focused primarily on the scriptural record and asked the following questions: (a) What physical and/or psychological symptoms are recorded in connection with demon possession? (b) Does Scripture indicate that all illness is of demonic etiology? (c) Does Scripture indicate that sinful desires and habits are demonically caused (e.g., demons of lust, food, et cetera)? (d) Are there any guidelines consistent with the biblical record for

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differential diagnosis of demon possession from mental illness?

Symptoms of Demon-possessed Persons

In several instances where demon possession is described in the biblical record, no specific symptoms are mentioned (e.g., Matthew 15:22-28, Mark 7:24-30). When identifiable symptoms are noted, they fall into the following categories:

1. The demon may speak using the voice of the possessed person, sometimes conveying knowledge of supernatural realities (Luke 4:33-35, 8:26-29; Acts 16:16-18).

2. The person may manifest supernormal strength (Matthew 8:28-34, Acts 19:16).

3. The person may go about naked (Mark 6:1-20, Luke 8:27).

4. The person may be unable to speak or hear (Mark 9:25, Luke 11:14).

5. The person may suffer from self-destructive, epileptic-like seizures with convulsions and other attendant symptoms such as rigidity, foaming at the mouth, and bruxism (Matthew 17:14-21, Mark 9:17, and Luke 9:37).

6. Blindness may result (Matthew 12:22).

In some cases, the symptoms caused by the demon seem to be continuously present as in categories 4 and 6 above. In other instances the manifestation of the demon's presence seems to be episodic as in categories 1 and 5.

Demons and Illness

If demons can cause the variety of symptoms noted above (and Scripture does not claim to be giving us a complete list, so it may actually be longer), is it then valid to contend that all physical and mental illness is demonically caused? Two considerations can be noted in answering this question.

First, if demons are the cause of all physical and mental illness, it follows that Scripture would recognize the commonality

between illnesses which appear to be caused by demonic intervention and those which appear to be caused by physical agents rather than making a distinction between the two. However, Scripture repeatedly distinguishes the state of being demon possessed (*daimonidzomenous*) from that of illness (usually *kakos* or *asthenos*). In at least 17 places in the Gospels and Acts this distinction is made (Matthew 4:24, 8:16, 10:1, 10:8; Mark 1:32-34, 3:10-11, 6:13, 16:17-18; Luke 4:40-41, 6:18-19, 7:21, 8:2, 9:1, 13:32; Acts 5:16, 8:6-7, 19:11-12).

Second, if demons are the cause of all illness, it would follow that all healing should occur by either binding of or exorcising of the offending demons. However, in looking at the above Scriptures, we find that both groups of persons were made whole but by different means: those who were demon possessed had the demons cast out (*ekballo*) of them, whereas nondemon-possessed persons were never healed by exorcism or binding of demons. A representative list of healings which contain no mention of exorcism include the healing of

1. skin diseases (Matthew 8:1-4; Luke 17:11-19)

2. lameness (Acts 3:1-10, 14:8-10)

3. blindness (Matthew 20:29-34; John 9:1-12)

4. paralysis (Matthew 9:1-8, 12:9-14; John 5:1-16)

5. chronic hemorrhaging (Matthew 9:18-26)

6. people at the point of death (Matthew 8:5-13; John 4:46-54)

Scripture teaches that people may be physically afflicted by Satan without being demon possessed as illustrated by the stories of Job and of the woman unable to straighten her back (Luke 13:10-13). It also teaches that demons can cause symptoms which are similar to physiologically or psychologically-induced illness. However, as has been shown above, the Bible repeatedly

makes a distinction between natural and supernatural causation in the disease process. To claim that all physical illness has a demonic basis is to go beyond, and even against, the teaching of God's Word.

Psychological Demons

There is within some parts of evangelical Christendom much discussion about demons of lust, greed, laziness, hatred, et cetera (e.g., Hammond & Hammond, 1973; Brooks, 1973b). The Christian church has usually understood these desires and habit patterns to be motivated by our sin nature — something within us that is part of our own human nature — rather than the result of some demon entering us from outside of ourselves. Thus the current discussion raises the question of the degree and extent to which demons are involved in the daily psychological processes which tempt every Christian. The extent to which demons are involved in temptation to sin may be conceptualized as a continuum as in Figure 1.

Beginning our discussion with the temptations that derive from our sinful human nature without demonic involvement, we find Scripture repeatedly affirming that man is able to sin without outside help. The familiar passage in Jeremiah 17 says: "The heart is deceitful above all things and

desperately corrupt." In Mark 7:20 and 21 Jesus says: "For from within, out of the heart of man, come evil thoughts, fornication, theft, murder, adultery, coveting, wickedness, deceit, licentiousness, envy, slander, pride, foolishness. All these evil things come from within, and they defile a man." And James 1:14 states that "each person is tempted when he is lured and enticed by his own desire (cf. also Galatians 5:16-24).

Scripture speaks of a second category of temptation which is demonic in its origin. Christ was tempted directly by Satan (Matthew 4:1-11). Satan apparently tempted Ananias to lie (Acts 5:3); he incited David to take a census in Israel in a way that was displeasing to God (1 Chronicles 21:1). An evil spirit also is spoken of as somehow involved in the treachery of the man of Shechem against Abimelech (Jude 9:23). Finally, the Apostle Paul reminds believers that they battle against evil supernatural forces, and thus must be fully equipped (Ephesians 6:10-18).

It seems likely that in many cases, yielding to one's sinful human impulses provides an opening for demonic temptation. For example, David's pride in the growing strength of Israel probably made him more easily susceptible to Satan's temptation to take a census for the wrong reasons (1 Chronicles 21:2-6). Judas' love of money made him

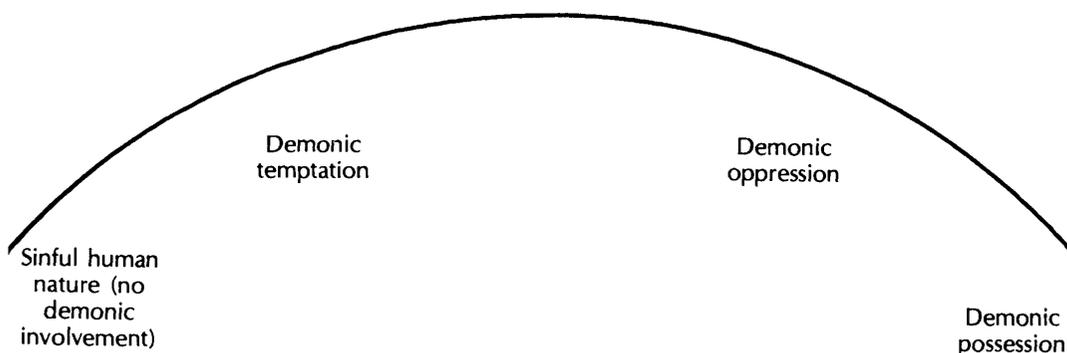


Figure 1

Demonic Involvement in Temptations to Sin

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susceptible to Satan's temptations to betray Jesus (John 12:4-6, 13:2, 27). Scripture repeatedly affirms that the practice of yielding to sin makes one less and less able to resist its temptations (John 8:34; Romans 6:12ff.; 2 Peter 2:19), which suggests that yielding to sinful temptations arising from one's own nature makes one increasingly susceptible to demonic temptation as well.

A third category of demonic involvement in human life is often referred to as demonic oppression or influence. Within this category, demons exert considerable influence over a person's life, short of actual possession (Unger, 1971, p. 113). Their influence may range from mild harassment to extreme subjection of the person involved. The tragic end of King Saul's life well illustrates the phenomenon of demonic oppression. Saul began to lose favor with God following his intrusion into the priest's office (1 Samuel 13:8-15) and then in his deliberate disobedience in the war with the Amalekites (1 Samuel 15:1-9). Saul apparently continued his disobedience toward God until God removed the Holy Spirit from him and an evil spirit came to torment him episodically for the rest of his life (1 Samuel 16:14-23, 18:21, 28:3-25).

Unger (1971, p. 114) summarizes the biblical data regarding manifestations of demonic oppression as: (a) blindness and hardness of heart toward the Gospel (2 Corinthians 4:4), (b) apostasy and doctrinal corruption (1 Timothy 4:1, 1 John 4:1, 2), and (c) indulging in sinful, defiling behavior (2 Peter 2:1-12). Wilson (1976, pp. 226-228) reviews three contemporary cases from his own practice which seem to fit these characteristics of oppression.

The evangelical literature on oppression suggests two main ways in which people become demonically oppressed — either through personal and continual involvement in sin or by family involvement in the occult (Koch & Lechler; 1971, Unger, 1971; and Wilson, 1976, et cetera). These two avenues

to oppression are consistent with the biblical data on the subject (e.g., 1 Timothy 4:1; Exodus 20:2-5).

A fourth category, and the most extreme form of demonic involvement in human life, demon possession, is a state in which one or more demonic spirits take control of the body and personality of a human being. During the times when the individual is possessed, the demons speak and act through him, and the person often has no recollection of the events which occur within these episodes. Between these intervals the person may behave in his normal manner. These characteristics of demon possession will be more fully discussed in the next section.

Although the evidence is somewhat limited, there appears to be some justification for the thesis that God recommends a different response to each of these four categories of temptation and demonic involvement. Regarding those temptations that derive primarily from fallen human nature, we are told to shun (or flee from) those passions and pursue righteousness, faith, love, and peace (2 Timothy 2:22). The biblical model for meeting this type of temptation (integrating the principles found in 2 Timothy 2:22, 1 John 1:9 and Philippians 4:8) is (a) recognizing the sinful impulse, (b) removing oneself from the temptation-producing environment, (c) confessing the sinful desire, and (d) replacing the sinful thought with pure thought patterns.

In contrast, when demons, rather than our own sin natures, are the agents of temptation, Christians are to take a very different stance. Christ withstood the tempter by skillful use of the Word (Matthew 4:1-11). Similarly, Christians are commanded to take an unyielding stand against the emissaries of Satan, fighting in the power of Christ and his Word (Ephesians 6). Peter gives a similar admonition when he says: "Be self-controlled and alert. Your enemy the devil prowls around like a roaring lion looking for someone to devour. *Resist him*, standing

firm in the faith" (1 Peter 5:8-9). James also states: "Resist the devil, and he will flee from you" (James 4:7).

These two principles are not contradictory. Believers are to judiciously remove themselves from the *source* of temptation, but can at the same time courageously resist the *agents* of that temptation when those agents are Satan or his demons. For temptations of demonic origin, the biblical pattern is to inwardly resist them in the power of God, rather than attempting to exorcise them.

Little is said in Scripture about a Christian's response to demonic oppression. When oppression is due to personal involvement in sin or the occult, confession and repentance are obviously in order. When oppression is due to familial, but not personal involvement in the occult, binding the spirits (commanding them in the name of Christ to no longer interfere with this person's life) would seem to be in order (cf. Luke 13:10-16). Concerning demon possession there seems to be no question, either in the biblical literature or in contemporary evangelical literature, that exorcism is indicated.

One of the major questions in contemporary charismatic circles is whether or not binding or exorcism (category 3 and 4 prescriptions) should be applied to temptations arising from category 1 such as lust, greed, and anger. The biblical evidence would suggest a negative answer. For example, no demon of lust was cast out of the woman caught in adultery (John 8) or the sinful woman of Luke 7, or the incestuous persons of 1 Corinthians 5. No demon of avarice was cast out of Zaccheus; no demon of unbelief was cast out of Peter following his threefold denial of Christ. No demon of contentiousness was cast out of the Corinthians or out of Euodias and Synteché (Philippians 4). In each of those cases and in the vast majority of instances where individuals were involved in sinful behavior, the focus is on the individual changing

himself with the help of God, not on the casting out of some external agent. Even in those instances where temptation was due in part to demonic forces, Christians are commanded to withstand or resist the tempters, rather than to exorcise them.

Psychologically, there seem to be at least three unhealthy aspects to the practice of explaining personal behavior in terms of demonic forces. First, it tends to remove the responsibility of recognizing and confessing one's own sinfulness. 1 Corinthians 10:13 clearly states that God will not allow believers to be tempted beyond what they are able to withstand, meaning that when we do sin, we are responsible for that action. As Montgomery (1976) rather bluntly states: "'The devil made me do it' is not an acceptable theological stance, but rather a demonic form of escapism to avoid confrontation with personal sin within" (p. 22).

Second, to view ourselves as a battleground upon which forces of good and evil alternately rampage without volitional control robs us of potency — we may fail to make needed changes in our lives because we believe such changes are beyond our control.

Third, by suppressing or repressing our own urges under the guise of demons rather than recognizing, confessing and working them through, we are building an unhealthy personality structure. Large portions of our selves remain dissociated rather than integrated.

Differential Diagnosis of Demon Possession and Mental Illness

Differentiation of demon possession from mental illness is immediately beset by several problems. The foremost of these is that the symptoms arising from psychopathology and demonization overlap to a considerable extent — nearly every symptom thought to be an indicator of demon possession is also found in psychopathology of nondemonic origin. The same phenomenon is found in

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the biblical record: blindness sometimes had a demonic etiology (Matthew 12:22) and at other times only a natural base (Mark 8:22-25). Deafness and dumbness were likewise found to sometimes have a natural (Mark 7:31-35) and sometimes a demonic basis (Mark 9:25).

Second, diagnosis is always forced to contend with the problem of role enactment. People continuously are fulfilling a variety of roles — husband, wife, father, mother, instructor, therapist, et cetera in which they behave as they consciously and unconsciously believe persons in these roles should act. A person who experiences unusual mental events and begins to believe that he is demon-possessed may act in ways that he understands to be consistent with demon possession, without conscious simulation on his own part. Such persons may readily manifest all of the classical symptoms of demon possession without actually being demonically possessed.

A third problem in differential diagnosis is that psychopathological states and demonic possession may coexist within the same person (Jackson, 1976, p. 263; Lechler, 1971, p. 160) with a consequent blending and overlapping of the symptoms resulting from each state.

A final preliminary problem is that we have no guarantee that the relatively brief descriptions of demonically-caused symptomatology found in Scripture were meant to be considered normative examples of possession across time and cultures. All that the narrative accounts of demonization found in the Gospels and Acts claim is that they are accurate descriptions of demonization of that time, not normative descriptions of demonization that can be used for all succeeding generations. Hermeneutically, it is more correct to accept the biblical symptomatic descriptions as suggestive criteria for diagnosis than as normative criteria.

A review of Nevius (1968), Unger (1971), Koch and Lechler (1971), and Montgomery

(1976) indicates that the following symptoms are often associated with contemporary demonization:

1. The demon(s) episodically take control of the possessed person, speaking and acting through him.

2. In these states the Spirit refers to himself as "I," and to the person whose body he is inhabiting as "he" or "she."

3. The voice intonation, facial expressions, and personality pattern during these episodes are often markedly different than those of the possessed person.

4. The demonized person may possess unusual physical strength.

5. The possessed person may have fits of rage with screaming, cursing, grinding of teeth, and concomitant violent behavior.

6. The possessed person may struggle and fight against all forms of Christian influence. He may go into a trance while prayer is being offered and frequently is unable to pronounce the name Jesus.

7. Possession is sometimes accompanied by other occult manifestations — poltergeists, mediumistic abilities, knowledge of languages, future events, and secrets which the possessed person did not have access to in his normal state.

The above list contains most of the symptoms commonly associated with possession. Other symptoms are mentioned by some authors but were not included here because they were contradicted by other authors of equal repute or because they occur so frequently within other psychopathological states as to have little differentiating value. As can be seen, all of the characteristics except number 7 are frequently found in other types of psychopathology and could also result from a person experiencing a psychotic episode who believed he was demon-possessed. Thus a symptomatic analysis may not be sufficient to yield a clear diagnosis.

Another possible way of differentiating psychopathology from demon possession

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that may be used by the Christian counselor, and one that is rarely discussed in the literature, is the gift of discerning of spirits spoken of in I Corinthians 12:10. A contextual and grammatical analysis suggests that this gift was a supernatural endowment given by God that enabled one to determine whether a given behavioral manifestation (prophecy, glossolalia, interpretation of tongues) was from the Holy Spirit, from a human spirit, or from a demonic spirit. It is perhaps reasonable to suggest that this gift of discerning of spirits may be used to discern whether a given behavioral manifestation is the result of a disordered human spirit or of a demonic spirit. The authors have had personal communication with two well-respected members of the evangelical community (Walker, 1975; McAllister, 1975) who report this use of the gift within their own counseling ministries. This need not be an either/or process. All counselors can use their natural facilities to discern between abnormal behavior produced by a disordered human nature and that produced by a demonic nature. In those instances where the diagnosis is still in question, consultation with a respected colleague who has the gift of discerning of spirits may prove to be helpful.

Summary and Conclusions

In summary, Scripture records a number of physical and psychological symptoms resulting from demon possession but records other instances where similar symptoms are the result of naturally-occurring illnesses. Scripture's repeated differentiation between naturally and demonically-caused illness argues forcefully for the fact that all illness is not of demonic causation.

It was suggested that temptations to sin arise in one of four basic categories — those which derive completely from our own human natures and those which reflect varying degrees of demonic intervention. The "psychological demons" frequently spoken

of today (such as demons of hate, lust, and resentment) are regularly identified in Scripture as arising from our human natures rather than from demonic sources.

Scripture suggests that the believer's response to temptation should vary in accordance with the source of that temptation. While exorcism is an appropriate method for dealing with actual cases of demon possession, no biblical justification for its use as a method of combatting temptations deriving from our own human nature was found.

Finally, two basic methods of differentiating psychopathology from demon possession were discussed — symptom analysis and the biblical gift of discerning of spirits. It was suggested that both methods be used in conjunction with one another in those instances where differential diagnosis is difficult.

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